#### **ATTACHMENT C-6**

# Governor's Safe and Drug Free Schools and Communities Program

# Subgrantee Work Plan/Progress Report Guidance

Material adapted from "Planning for Prevention: An Evidence-Based Toolkit for Effective Substance Abuse Planning," a draft document produced by the Southwest Center for the Application of Prevention Technology and the Nebraska Health and Human Service System's Office of Mental Health, Substance Abuse and Addiction Services.

### I. GOALS

Goals are general statements of intended accomplishment, which describe the kinds of changes—or **outcomes**—that you want to achieve. In substance abuse and violence prevention, **goals** are almost always related to *behavior* change. That is because the ultimate goal of those prevention efforts is to decrease the rate of substance use—a behavior. In working with individuals, **goals** should always focus on changes you are attempting to facilitate in people's *behavior*. However, if your initiative is aimed at affecting changes in a system (e.g. prevention system, school system, judicial system, etc.) there are many areas of change that you may focus on in developing **goals**, including behavior, physical conditions, degree of justice, or efficiency.

# Example Goal: Decrease alcohol use by high school youth.

<u>Hint #1</u>: Be careful *not* to choose goals that you don't have the capacity to measure. If you have no way to monitor whether or not the goal is being achieved, then you shouldn't choose it as a goal!

<u>Hint #2</u>: It is best to limit the number of program goals to three or fewer. If you find you have many more goals than that, it is probably a sign that you are trying to do too much.

#### II. OBJECTIVES

Objectives are specific statements of intended accomplishment that are designed to assist in achieving the program goal. Objectives address the *underlying conditions* that either contribute to—or protect against—substance use (i.e. **risk and protective factors**). Programs focusing on changing individual or group behavior should focus on developing objectives that are aimed at decreasing risk factors and increasing protective factors. For those involved in broader, systematic prevention planning efforts, objectives might not address risk and protective factors. Instead, they may encompass issues related to systems and infrastructure (e.g., workforce development, leveraging of resources, etc.). In either case, there should always be a direct and logical link between a program's goals and its objectives.

# **Example Objectives**:

- Decrease favorable attitudes among high school youth toward underage drinking. (Risk factor: Favorable attitudes towards the problem behavior)
- Decrease number of parents who allow high-school-aged youth to drink at their home. (Risk Factor: Parental attitudes and involvement in the problem behavior)

<u>Hint #1</u>: Consider what you will need to do to measure the objective. If it is too hard to measure, you should discard it.

<u>Hint #2</u>: The more specific the objective the better. If you avoid ambiguous or general language in developing your objective in the beginning, it will be easier to evaluate the effectiveness of your program later

# III. OUTCOMES

Outcomes are very specific, measurable and time-limited statements that describe exactly how much change will be produced by the accomplishment of a goal. Outcomes include three important components:

- 1. **Performance Standards** the degree of change to be accomplished
- 2. **Time Frames** the timelines (or deadlines) for achieving immediate, intermediate and long-term outcomes
- 3. **Sentence Construction** a standard format for expressing outcomes
  - a) **To** (action verb) (statement reflecting objective) **by** (performance standard) **by** (deadline)

Ex: **To** (decrease)(the number of high school students who report favorable attitudes toward underage drinking) **by** (50%) **by** (September 30, 2005)

**Example Outcome:** To decrease the number of high school students who report favorable attitudes toward underage drinking) by 50% by September 30, 2005

a) **By** (deadline), **the** (action verb) (statement reflecting objective) **will** (performance standard) *Ex:* **By** (September 30, 2005), **the** (number of parents who allow their children or other minors to drink alcohol at their home) **will** (decrease by 20%)

**Example Outcome:** By September 30, 2005, the number of parents who allow their children or other minors to drink alcohol at their home will decrease by 20%. (Risk Factor: Parental attitudes and involvement in the problem behavior)

Because community level prevention efforts tend to focus on behavioral changes, which are **long-term outcomes**, it is important to also develop **intermediate** and **immediate outcomes**. When goals are related to behavior change, **immediate outcomes** deal with changes in knowledge or skills, and **intermediate outcomes** deal with changes in risk and protective factors.

Community-wide (or environmental) changes are associated with behavior change for the entire population which requires long-term outcomes. In this case, immediate outcomes will involve such things as changes in policies, practices, procedures, population knowledge and population skills. Intermediate outcomes will involve population-level risk and protective factors such as community norms, values and attitudes.

<u>Hint #1:</u> Outcomes are different from **outputs**. While outcomes are descriptions of the extent of change that is hoped for, outputs are quantitative measures of concrete activities or processes (e.g., number of meetings attended; number of participants who showed up).

Hint #2: When writing outcomes, it is important to be "SMART":

- Specific
- Measurable
- Achievable
- Related to the objective
- Time Limited

### IV. ACTIVITIES

**Activities** are the specific actions that are implemented as part of an overall strategy to achieve the outcome envisioned by the program's goal(s) and objective(s). Program activities result in **outputs**, which are quantifiable measures that provide a means for measuring the concrete effects of an activity.

Example Activity: A media campaign will be conducted to dispel the myth among parents that underage drinking is a rite of passage, and to discourage parents from allowing youth to drink alcohol at home.

**Example Output**: The media campaign will feature 1,600 radio and television spots over a 16 county area, reaching an estimated 50,000 parents.

# V. TIME LINES (Work Plan only)

An **implementation plan** is the series of planned program **activities**, laid out in chronological order, that need to take place in order for the prevention plan to move forward. The **implementation plan** lays out the order of the **activities** intended to be carried out, and identifies the resulting **outputs** to be tracked for each activity.

The easiest way to develop an implementation plan is to create a **time line** for carrying out each step of the plan. The time line should include times (if possible), dates, and places. Although time lines can be written in a narrative form, charting activities on a calendar can help in visualizing the plan more easily.

# VI. EVALUATION

Evaluation is ongoing measurement of progress in implementing strategies and achieving outcomes. Successful evaluation includes both **process/quantitative** (documenting program implementation issues: e.g. number of recipients/participants, number of educational sessions, number, materials distributed, etc) and **outcome/qualitative** (documenting the outcomes achieved: e.g. changes in behaviors, etc.). Evaluation planning is an essential part of initial program design, and requires good baseline data at the outset.

**Example Evaluation Plan Component:** Conduct a pre- and post- survey of parents residing within the 16 county area covered by the media campaign to: 1) determine the campaign's audience reach, (process) and 2) determine the degree of change, if any, in parental behaviors related to allowing youth to drink alcohol at home (outcome).

## VII. PROBLEMS IDENTIFIED (Progress Report only)

A good evaluation design will assist in the early discovery, and resolution, of areas of concern and/or barriers to effective implementation of your strategy.

Example of an Identified Problem: Although there are significant numbers of non-English speaking Hispanic families in the targeted 16 county area, the media campaign and it's associated baseline survey were conducted only in English, resulting in decreased exposure among Hispanic parents.

## VIII. PLANS TO RESOLVE THE PROBLEM (Progress Report only)

Ongoing evaluation allows for continuous improvement of program implementation and progress toward outcomes. Potential solutions may include making special accommodations for targeted populations, or revising goals, objectives, outcomes and/or activities.

Example of a Plan to Resolve a Problem: A partnership with Hispanic radio stations and television stations that feature Hispanic programming will enable the creation and dissemination of Spanish-language versions of the media campaign's television and radio spots. The baseline survey of parental attitudes has been translated into Spanish, and will be conducted among Hispanic households in the area. The post-survey will also be translated into Spanish and administered to those households after the conclusion of the campaign.

# IX. ADDITIONAL COMMENTS (Progress Report only)

This section is to be used to provide information pertinent to the effective and timely achievement and completion of program goals, objectives, outcomes and activities. This section may include notification of staff or administrative/procedural changes and technical assistance needs.

# SUMMARY OF EXAMPLES USED IN THIS SECTION

Goal: Decrease alcohol use by high school youth.

**Objective:** Decrease number of parents who allow high-school-aged youth to drink at their home. (Risk Factor: Parental attitudes and involvement in the problem behavior)

**Outcome:** By September 30, 2005, the number of parents who allow their children or other minors to drink alcohol at their home will decrease by 20%.

**Activity:** A media campaign will be conducted to dispel the myth among parents that underage drinking is a rite of passage, and to discourage parents from allowing youth to drink alcohol at home.

**Output**: The media campaign will feature 1,600 radio and television spots over a 16 county area, reaching an estimated 50,000 parents.

**Evaluation Plan Component:** Conduct a pre- and post- survey of parents residing within the 16 county area covered by the media campaign to 1) determine the campaign's audience reach, (process) and 2) determine the degree of change, if any, in parental behaviors related to allowing youth to drink alcohol at home (outcome).

**Identified Problem:** Although there are significant numbers of non-English speaking Hispanic families in the targeted 16 county area, the media campaign and it's associated baseline survey were conducted only in English, resulting in decreased outcomes among Hispanic parents.

Plan to Resolve a Problem: A partnership with Hispanic radio stations and television stations that feature Hispanic programming will enable the creation and dissemination of Spanishlanguage versions of the media campaign's television and radio spots. The baseline survey of parental attitudes has been translated into Spanish, and will be conducted among Hispanic households in the area. The post-survey will also be translated into Spanish and administered to those households after the conclusion of the campaign.